



## Letter to the Editor

## Alcohol and substance use among arrestees examined in police custody



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Police custody  
Alcohol  
Addictive behaviours  
Dependence  
Substance use  
France

Dear Editor,

We read with interest the report by Clément et al. on medical and social characteristics of arrestees reporting addictive behaviours.<sup>1</sup> The introduction contains several inaccuracies on police custody in France. First, the cited figure of 580,108 refers to the number of custody cases and does not concern the number of persons in custody, which is different, since many young detainees can be arrested several times per year.<sup>2</sup> Second, although the authors refer to a 2011 act as entitling any arrestee to a medical examination in police custody, the rules governing police custody and medical intervention in France have been clearly established by the legislation much earlier, since 1993.<sup>3</sup> According to French Law, any forensic physician, general practitioner, or emergency doctor may be asked to examine detainees. Forensic physicians from academic hospitals are only a minority of those called on by police officers to attend detainees. Third, the medical examination of adolescents aged 13–16 is systematic but any person, including adolescents, can refuse to be examined. Qualifying medical examination as compulsory is therefore inadequate. Fourth, the attending physician must be called on within three hours after arrestees were informed of the right to be examined,<sup>4</sup> which is different from a duty to perform the examination in the first three hours after the onset of detention, as mentioned by the authors.

We are concerned by the poor description of the studied population, which makes the results difficult to interpret. It is unclear from the inclusion criteria whether the mentioned alcohol, tobacco or substance use referred to lifetime experience, to recent use, or to chronic use. It is unclear from the exclusion criteria whether or not individuals could participate several times in the study. Since only a minority of questionnaires were completed by first-time arrestees, we wonder how many individuals completed the 817 collected questionnaires. The criteria used to characterize the tobacco, alcohol and illicit drug consumption, abuse and dependence were absent from the methods section. The authors' claim that 'more than one third' of examined arrestees were dependent on at least one substance needs to be clarified.

We appreciate that some social data were collected from the arrestees. However, no mention was made of any reference to support the choice of the criteria used to describe social characteristics. School is compulsory up to the age of 16 in France, which suggests that the items 'unemployed', 'living alone', or 'responsible for at least one child' are inappropriate to characterize the social situation of 13- to 16-year-old adolescents.

We note that Clément et al. misinterpreted a study from our group when they claimed that it referred to alcohol use only.<sup>5</sup> In this study, we referred to the use of alcohol, tobacco, cannabis, cocaine, and opiates in all 2490 examined arrestees. Two other prospective studies focussing on addictive behaviours among large numbers of arrestees in France have been recently published.<sup>6,7</sup>

Finally, the authors claimed that the use of intoxicant and illegal substances has direct and indirect effects on almost half of the detainees. The relationships between alcohol or substance use and crime commitment have been the basis of numerous, extensive studies for years. We believe that the descriptive approach of their study could not allow them to appreciate such relationships, except in the limited numbers of cases related to drug driving, illicit drug possession, or drink driving. In the other cases, the relationships between substance use and the suspected crimes were purely hypothetical.

## Conflict of interest

None.

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Céline Denis, MD  
Department of Forensic Medicine, Hôpital Jean-Verdier (AP-HP),  
Bondy F-93140, France

Patrick Chariot, MD\*  
Department of Forensic Medicine, Hôpital Jean-Verdier (AP-HP),  
Bondy F-93140, France

Institute for Interdisciplinary Research on Social Issues (IRIS),  
UMR 8156-997, UFR SMBH, Sorbonne Paris Cité,  
Université Paris 13, France

\* Corresponding author. Department of Forensic Medicine,  
Hôpital Jean-Verdier (AP-HP), 93140 Bondy, France.  
Tel.: +33 148026325; fax: +33 148026557.  
E-mail address: [patrick.chariot@jvr.aphp.fr](mailto:patrick.chariot@jvr.aphp.fr) (P. Chariot).

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